FROM MCANDREWS HELD, & MALLOY   JUL 12 2006 7. 12'06 16:04/ST. 16:03/NO. 4861050948 P 3

Fees pursuant to the consolidated Appropriatos Act 2005 (H.R. 4818).

FEE TRANSMITTAL
for FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

Complete if Known	
Application Number	10/001,494
Filing Date	October 31, 2001
First Named Inventor	Roberto A. Capodieci
Examiner Name	Nina NMN Bhat
Art Unit	1764

TOTAL AMOUNT OF PAYMENT	($)	180.00	Attorney Docket No.	12598US03

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 13-0017   Deposit Account Name: McAndrews Held & Malloy

For the above-identified deposit account, the Director is hereby authorized to (check all that apply)

☒ Charge Fee(s) indicated below   ☐ Charge Fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fees(s) ☒ Credit any overpayments
under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES Fee ($)	Small Entity Fee($)	SEARCH FEES Fee($)	Small Entity Fee($)	EXAMINATION FEES Fee($)	Small Entity Fee($)	Fees Paid($)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description		Fee($)	Small Entity Fee($)
Each claim over 20 (including Reissues)		50	25
Each independent claim over 3 (including Reissues)		200	100
Multiple dependent claims		360	180

Total Claims		Extra Claims		Fee($)		Fee Paid ($)	Multiple Dependent Claims	
_____	-20 or HP	_____	x	_____	=	_____	Fee	Fee Paid ($)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims		Extra Claims		Fee($)		Fee Paid ($)
_____	-3 or HP	_____	x	_____	=	_____

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee($)		Fee Paid($)
_____	-100	_____	/50	_____ (round up to a whole number)	x	_____	=	_____

4. OTHER FEE(S)   Fee Paid($)

Non-English Specification, $130 fee (no small entity discount)   _____

Other (e.g., late filing surcharge): Filing Information Disclosure Statement $180.00

SUBMITTED BY

Signature	James H. Williams	Registration No. (Attorney/Agent)	56,883	Telephone	(312) 775-8000
Name (print/type)	James H. Williams			Date	July 12, 2006